



INDIGENOUS DOSE ADMINISTRATION AIDS – PROGRAM RULES

October 2021



Australian Government
Department of Health

This program is funded by the Australian Government Department of Health as part of the Seventh Community Pharmacy Agreement.

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1 INTRODUCTION

This document outlines the Program Rules governing the Indigenous Dose Administration Aids (IDAA) Program. This document must be read in conjunction with:

- the Pharmacy Programs Administrator (PPA) General Terms and Conditions (General Terms);
- the Guidelines on Dose Administration Aids and Staged Supply of Dispensed Medicines by the Pharmacy Board of Australia (Pharmacy Board Guidelines); and
- “Standards and Guidelines for Pharmacists Providing a DAA Services” and “Guide to providing pharmacy services to Aboriginal and Torres Strait Islander people” by the Pharmaceutical Society of Australia (collectively PSA Standards).

Definitions in the General Terms apply to these Program Rules.

2 BACKGROUND

A Dose Administration Aid (DAA) is a well-sealed, tamper-evident device that allows individual medicine doses to be organised according to the prescribed dose schedule. There are a number of commercially available products on the market.

The IDAA Program is designed to assist Patients in the community who identify as Aboriginal and/or Torres Strait Islander to better manage their medicines, with the objective of avoiding medication misadventure and improving medication adherence. The IDAA Program is funded under the Seventh Community Pharmacy Agreement (7CPA), which aims to:

- Improve medication adherence and management, thereby assisting in reducing the burden of chronic disease in this population; and
- Decrease the incidence of adverse events from medication mismanagement, including adverse events resulting in hospitalisation.

3 PARTICIPATION

3.1 Pharmacy Requirements for Participation

- To be eligible to become an Approved Service Provider and participate in the IDAA Program, a Pharmacy must:
- Be approved to dispense pharmaceutical benefits as part of the Pharmaceutical Benefits Scheme (PBS) defined in Section 90 of the National Health Act 1953 (Section 90 Pharmacy); and
- Be accredited by an approved Pharmacy Accreditation Program or be in the process of attaining Accreditation within six months of applying to participate in the IDAA Program. The Commonwealth may waive the requirement to hold or be seeking accreditation in order to ensure Patients can access the Program; and
- Abide by the PPA Terms and Conditions available here; and
- Provide IDAA services in accordance with the current IDAA Program Rules, PSA Standards and the Pharmacy Board of Australia Guidelines; and
- Ensure that the IDAA is checked by a Registered Pharmacist; and

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- any interviews or consultations are undertaken with the Patient and/or Patient's carer in a culturally sensitive manner with consideration of the Patient's comfort and right to privacy; and
- Register for the Program via the Pharmacy Programs Administrator (PPA) Portal; and
- Undertake to participate in improving cultural competency by regularly participating in appropriate training and agree to regularly liaise with local Aboriginal and Torres Strait Islander organisations and local communities to ensure the services provided continue to meet the health needs of the patients; and
- Ensure the Registered Pharmacist conducting any IDAA activities is not responsible for dispensing or undertaking other professional duties at the time, this includes any consultations with the patient or members of the healthcare team; and
- Comply with legislative requirements in relation to the storage and access by staff to medicines that are packed in a DAA and that the area where the DAAs are packed is not accessible to the public.

3.2 Patient Requirements for Participation

To be eligible for an IDAA Service funded under the 7CPA, the Patient must satisfy the following mandatory Eligibility Criteria:

- Self-identifies as an Aboriginal and/or Torres Strait Islander person; and
- Holds a Medicare and/or Department of Veterans' Affairs (DVA) card; OR
- is a person who is eligible for a Medicare card; and
- Be a patient likely to benefit from a DAA as identified by a prescriber or by another healthcare provider; and
- Is living at home in a community setting; and
- Provides appropriate consent for provision of the IDAA Service prior to receiving the service; and
- Has difficulties managing their medications due to literacy or language issues, physical disability or cognitive difficulties; OR
- Is taking one or more prescription medicine(s) and is experiencing difficulties with medication management.

Note: when identifying a patient for a DAA service, health professionals should ensure a service is clinically indicated for cases of non-intentional non-adherence. A service should not be recommended for patient convenience or cases where the patient is not non-intentionally non-adherent.

IDAA services funded under this program must be supplied by a patient's preferred Community Pharmacy.

IDAA Services funded under this Program are not available to In-patients of public or private hospitals, day hospital facilities, transitional care facilities, or to residents of an Aged Care Facility or Patients in a correctional facility.

IDAA Services funded under this Program are not available to Patients receiving DAA Services funded under other federal or State and Territory Government programs. Claims cannot be made for IDAA Services provided as part of the Department of Veterans Affairs (DVA) DAA Program.

Where a Patient does not meet the Eligibility Criteria, the Approved Service Provider may offer the service at a Patient's own cost.

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3.3 Patient Consent

The Service Provider must obtain appropriate written or verbal consent from the Patient or the Patient’s carer prior to providing the Service. This consent should be obtained by using the Indigenous Dose Administration Aid Patient Information and Consent Form and may be adapted or translated to meet the communication needs of the local community, provided the content within the Patient Information and Consent Form is retained.

4 IDAA PROGRAM ELEMENTS

A DAA Service must be conducted in accordance with the Pharmacy Board Guidelines and PSA Standards; this includes the routine monitoring and assessment of the Patient’s use of the DAA.

To be eligible to claim for IDAA Services under this Program, information must be collected by the Approved Service Provider to ensure the eligibility requirements of these Program Rules are met and the Supporting Documentation outlined in clause 8.3. This includes confirmation from the Patient’s prescriber regarding the medicines to be packed in a DAA.

5 FEES

Approved Service Providers may claim a fee for the provision of weekly DAA Services to Patients that meet the Eligibility Criteria in Clause 3.2. Supporting documentation is required to be retained for each service claimed as per Clause 9.

The following fees are payable by the PPA for provision of an IDAA Service. Approved Service Providers may NOT apply an additional Patient charge for an IDAA service delivered under the IDAA Program.

Table 5-1: Provision of DAA Service Fee

Fee (per Patient)	Description
\$11.60	Provision of weekly IDAA Service (including regular follow up with Patient) for all eligible Patients who receive an IDAA Service.

Note: Patients will still be required to pay any costs required to obtain the medicines that will be packed into the DAA, including the PBS co-payment (if applicable) when medications are dispensed.

6 FUNDING AVAILABILITY

There is no weekly cap on Services provided under the IDAA Program. Services provided under the IDAA Program will not contribute to the Service Provider’s DAA weekly cap under the DAA Program. However, expenditure on the IDAA Program will be monitored.

7 REGISTRATION

To register as an Approved Service Provider, a Pharmacy must register via the PPA Portal.

An Approved Service Provider will not be registered until the Approved Service Provider receives email notification from the PPA confirming that registration has been successful.

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8 CLAIMS

8.1 Claims Submission

An Approved Service Provider may submit claims for providing IDAA Services that meet the Patient Eligibility Criteria and the following criteria:

- a. The Patient's medicines in the DAA are packed and dispensed in the Pharmacy by the claiming Approved Service Provider in accordance with the relevant quality standard; or
- b. The Patient's medicines in the DAA are dispensed by the claiming Approved Service Provider but are packed at another site (DAA packing warehouse, another Pharmacy, etc.) that meets the Pharmacy approval authority requirements in the relevant State or Territory as well as the relevant quality standard.

Claims must be submitted online via the PPA Portal.

IDAA Services must be claimed by the end of the next calendar month after the Service being provided, e.g. DAA Services undertaken in March must be claimed by 30 April. Claims that are outside this timeframe cannot be submitted and will not be paid.

All information entered on the Claim must be correct as any inconsistencies may prevent claim submission.

A Patient may continue to receive an IDAA Service if they no longer meet the Patient Eligibility Criteria for a maximum of four weeks.

8.2 Claim Data

The following information must be provided to the PPA in order to claim a payment under this Program for the provision of a weekly DAA Service:

- a. Service Provider identifiers (e.g. Section 90)
- b. Patient's Medicare/DVA Card Number
- c. Start date(s) of the DAA;
- d. A declaration by the claiming Approved Service Provider that the Patient satisfies the Eligibility Criteria outlined in clause 3.2 of these Program Rules including that the Patient has consented to receive the service in writing OR verbally and that consent is retained as required in clause 8.3 below.

8.3 Supporting Documentation

The following information must be retained by the Approved Service Provider for seven (7) years to support any Claim for payment made under these Program Rules:

- a. Section 90 number at the time of the provision of the DAA service
- b. Pharmacy Accreditation ID at the time of provision of the IDAA service
- c. Registered Pharmacist Identifier (e.g. AHPRA registration number)
- d. Copy of the appropriate written or verbal consent from the Patient or the Patient's carer
- e. Patient's name and address

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- f. Patient's Medicare/DVA Card number
- g. How the Patient has satisfied the other Eligibility Criteria
- h. List of all prescription and non-prescription medicines the Patient is taking at the time the DAA service is provided
- i. List of all prescription and non-prescription medicines packed into the DAA
- j. Start date(s) of the DAA.

Either an electronic or paper-based system may be used to record the Supporting Documentation.

9 AUDIT AND COMPLIANCE REQUIREMENTS

Service Providers must retain full and true records (including all patient consent forms) in relation to the provision of services for not less than seven years after the claim for payment. Such records must be kept in a manner that permits them to be conveniently and properly audited, and enables the amounts claimed as well as the services provided under the General Terms and these Program Rules to be determined. Service Providers may be subject to audits by the Australian Government Department of Health (or its representative) to ensure that the General Terms and these Program Rules have been complied with, and must provide all and any records requested as part of such audit(s).

Service Providers must also ensure that they are using current documents when obtaining information or consent from patients. Service Providers that wrongfully or incorrectly receive support and/or do not meet the requirements set out in the General Terms and these Program Rules may be subject to compliance action (as determined by the Australian Government Department of Health or Pharmacy Programs Administrator) and repayment may be required. Under section 137.1 of the Criminal Code, giving false and misleading information is a serious offence. If an audit/compliance action is to be conducted, Service Providers will be required to produce documentation within a specified time frame.

10 RESOURCES

IDAA Program resources are available for download from the PPA website.